

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

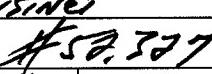
*(to be used for all correspondence after initial filing)*

|  |                      |                        |            |
|--|----------------------|------------------------|------------|
|  | Application Number   | 10/765,963-Conf. #2340 |            |
|  | Filing Date          | January 29, 2004       |            |
|  | First Named Inventor | Kazuo SHIOTA           |            |
|  | Art Unit             | 2624                   |            |
|  | Examiner Name        | D. Rashid              |            |
| Total Number of Pages in This Submission |                      | Attorney Docket Number | 2091-0309P |

## ENCLOSURES (Check all that apply)

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):<br><div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Statement of Substance of Interview</div> |
| Remarks  |  |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | BIRCH, STEWART, KOLASCH & BIRCH, LLP  |          |        |
| Signature    |                 |          |        |
| Printed name | Marc S. Weiner  |          |        |
| Date         | November 2, 2009  | Reg. No. | 32,181 |